

Family Day Care Inspection

Provider's Name:

City:

Provider Number:

Inspector:

Date of Inspection:

Time of Inspection:

Yes	No	NA	A. Provider's Practices/Maximum Capacity/Care of Children
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1. Is the number of children in care 12 or less, including the provider's own children who are under six years of age? 67:42:03:01
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2. If the provider is caring for more than four children under the age of two, or more than two children under one year of age, is a registered helper present? 67:42:03:04.01
<input type="checkbox"/>	<input type="checkbox"/>		3. Is an adult, over the age of 18, always present in the home to supervise children? 67:42:03:15 NOTE: Individuals under 18 years of age are not to be left alone with children in care. The use of a substitute, which is anyone 18 years of age or older, left to care for children when the provider is absent from the home, is limited to no more than 12 hours per week. 67:42:03:07.01, 67:42:03:07.05
<input type="checkbox"/>	<input type="checkbox"/>		4. Are parents notified when the provider plans to be absent from the home and a helper is used? 67:42:03:15
<input type="checkbox"/>	<input type="checkbox"/>		5. Are parents allowed to come into the registered home at any time to observe when their child is present? 67:42:03:18
<input type="checkbox"/>	<input type="checkbox"/>		6. Is the provider aware of their legal responsibility to report immediately any suspicions of child abuse and neglect to the Department of Social Services, law enforcement or the state's attorney? 67:42:03:09.01
<input type="checkbox"/>	<input type="checkbox"/>		7. Will the provider comply with their responsibility to report to Child Care Services any changes in circumstances that may affect their ability to meet registration standards? 67:42:16:09 (2) Note: This includes but is not limited to: moving to a new home, additional people in home, using space not yet approved, involvement with CPS or LE etc.
<input type="checkbox"/>	<input type="checkbox"/>		8. Will the provider comply with their responsibility to report to Child Care Services within 24 hours any unusual circumstances such as fire, serious injury or death of a child in care, etc.? 67:42:16:09
<input type="checkbox"/>	<input type="checkbox"/>		9. Will the provider maintain confidentiality regarding the details of a child's life or the life of the child's family from any unauthorized individuals, including via social media or other communications? 67:42:16:14
<input type="checkbox"/>	<input type="checkbox"/>		10. Will the provider comply with their responsibility to report to the Department of Health if a child in care contracts a communicable disease? 67:42:03:08
<input type="checkbox"/>	<input type="checkbox"/>		11. Will the provider follow the Department of Health's Recommendations for exclusion should a child contract a communicable disease? 67:42:03:08

- ☐ ☐ ☐ 12. Does the provider obtain written consent from each child's parent or guardian to administer all prescription and non-prescription medication? This consent should outline specific dates medication is to be given. 67:42:03:08.01
- ☐ ☐ ☐ 13. Does the provider document each medication given to each child? Documentation is to include dose, child's name, time and date given along with the provider or helper's signature. 67:42:03:08.01
- ☐ ☐ ☐ 14. Are medications kept in their original container and have legible directions, expiration dates; prescription medication containers also contain doctor and child's name? 67:42:03:08.01
- ☐ ☐ ☐ 15. Are medications stored properly? This includes being out of reach from children and in a non-absorbent container if refrigeration is required. 67:42:03:08.01
- ☐ ☐ 16. Does the provider wash her/his hands after using the restroom, changing a diaper, working with soiled clothing/bedding, and before handling food? 67:42:03:19
- ☐ ☐ 17. Does the provider ensure children wash hands before/after meals and after using the restroom? 67:42:03:19
- ☐ ☐ ☐ 18. Does the provider stay on the same level of the home as the children or is able to hear them and expeditiously respond to their needs when caring for children under the age of three years? 67:42:03:15
- ☐ ☐ 19. When children are in care during the day, does the provider remain awake and alert to the needs of all the children? 67:42:03:15
- ☐ ☐ 20. Does the provider ensure children are given direct care, protection, supervision and guidance through active involvement or direct supervision?
- ☐ ☐ ☐ 21. If the provider transports children, do they ensure each individual child, who is under age 5 and/or less than 40 pounds, is secured in a child passenger restraint system; and children over age 5 and/or over 40 pounds are secured in a seat belt as required by law? 67:42:16:15
- ☐ ☐ 22. Does the provider refrain from delegating discipline to other children using humiliating or frightening punishment such as: any type of physical discipline; verbal abuse; restriction of movement or confinement; withholding or forcing of meals, snacks, and naps and the use of substances such as soap or pepper or hot sauce? 67:42:03:16
- ☐ ☐ 23. Are discipline methods appropriate to the child's age and development? 67:42:03:16
- ☐ ☐ ☐ 24. If provider uses separation as a method of discipline, is child within sight and hearing range at all times? 67:42:03:16
- ☐ ☐ ☐ 25. Are infants held while being bottle-fed and fed according to their individual schedule? 67:42:03:13

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| <input type="checkbox"/> | <input type="checkbox"/> | | 26. Does meal and snack planning appear to include meals that consist of a variety of nutritional foods that meet at least one-third of the child's daily nutritional needs?
67:42:03:13 |
| <input type="checkbox"/> | <input type="checkbox"/> | | 27. Are menus posted and retained for 6 months following the week it was prepared for? 67:42:03:13 |
| <input type="checkbox"/> | <input type="checkbox"/> | | 28. Does the dining area used at mealtime have sufficient seating to accommodate the number of children being fed? 67:42:03:06 |
| <input type="checkbox"/> | <input type="checkbox"/> | | 29. Does the provider, and all household members, refrain from smoking in the home during the time day care children are receiving care? SDCL 34-46-14 |

Yes	No	NA	B. Record Keeping/Fire Safety & Emergency Weather Drills
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| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 30. Does each child's record contain all required information? 67:42:16:13 |
| <input type="checkbox"/> | <input type="checkbox"/> | | 31. Are children's records retained for at least 6 months after care ceases?
67:42:16:13 |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 32. Do provider and helper records contain all required information? 67:42:03:07.03 |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 33. Are helper's records retained for at least 6 months after employment ceases?
67:42:03:07.03 |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 34. Has the provider completed six hours of training in at least three topic areas in the past year? Of those hours, only three are limited to reading or watching TV or video etc. 67:42:03:07.02 |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 35. Have all helpers completed orientation training within 90 days of hire?
67:42:03:07.02 |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 36. Have all helpers completed six hours of training in at least three separate topic areas in the past year? 67:42:03:07.02 |
| <input type="checkbox"/> | <input type="checkbox"/> | | 37. Does the provider have a current CPR certification? 67:42:03:07.02 |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 38. Do the helpers have current CPR certification? 67:42:03:07.02 |
| <input type="checkbox"/> | <input type="checkbox"/> | | 39. Does the provider have a written plan for prevention and response to emergencies due to food and allergic reactions? 67:42:03:13 |
| <input type="checkbox"/> | <input type="checkbox"/> | | 40. Does the provider have a written emergency preparedness and response plan in place which covers all areas required to include: evacuation; relocation; shelter-in-place; lock-down procedures; procedures for communication & reunification with families; continuity of operations, accommodation of infants & toddlers; children with disabilities & children with chronic medical conditions?
67:42:03:11.03 |

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|--------------------------|--------------------------|--------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 41. Are the helpers aware of the emergency preparedness plan and procedures?
67:42:03:11.03 |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 42. Does the provider have documentation showing four fire drills and one tornado drill was conducted in the past year? 67:42:03:11.03 |
| Yes | No | NA | C. Health & Safety Features of the Home - Indoor Environmental Observations |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 43. Is a copy of the latest Family Day Care Inspection and Inspection Summary posted in a visible location? 67:42:16:17 |
| <input type="checkbox"/> | <input type="checkbox"/> | | 44. Does the provider have a working telephone? 67:42:16:18 |
| <input type="checkbox"/> | <input type="checkbox"/> | | 45. Is the home clean, organized, free of litter & rubbish? 67:42:03:12 |
| <input type="checkbox"/> | <input type="checkbox"/> | | 46. Is garbage kept in a durable, easy to clean container that is non-absorbent and emptied often enough to prevent odors or attract insects? 67:42:03:12 |
| <input type="checkbox"/> | <input type="checkbox"/> | | 47. Are toys that come in contact with a child's saliva or other bodily fluids sanitized with the appropriate ratio of bleach to water; sanitized in a dishwasher; or sanitized with a product approved for use? 67:42:03:12 |
| <input type="checkbox"/> | <input type="checkbox"/> | | 48. Does the provider have a procedure in place for the handling and storage of hazardous materials & the disposal of bio contaminants? 67:42:03:12 |
| <input type="checkbox"/> | <input type="checkbox"/> | | 49. Are hazardous cleaning supplies stored in an area or manner inaccessible to children? 67:42:03:12 |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 50.. Is there a designated area for diaper changing that is easily cleanable and non-absorbent? 67:42:03:12 |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 51. Does the provider sanitize the diaper change area with a solution of the appropriate bleach to water ratio or use an approved sanitizer? 67:42:03:12 |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 52. Are children under the age of 3 provided with daily opportunities to freely move about in a safe, clean, and uncluttered area? 67:42:03:15 |
| <input type="checkbox"/> | <input type="checkbox"/> | | 53. Each child has a mat or blanket to lie on during nap or rest periods? 67:42:03:23 |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 54. Are cribs and mattresses in good condition & stackable cribs are not used?
67:42:03:23 |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 55. Are infants placed on their back to sleep? 67:42:03:23 |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 56. Is soft bedding that could pose a suffocation hazard removed from the infant sleep environment? 67:42:03:23 |
| <input type="checkbox"/> | <input type="checkbox"/> | | 57. Is food stored in a way to protect it from potential contamination? 67:42:03:11.08 |

- ☐ ☐ 58. Is milk that is served to children purchased at a store to assure pasteurization?
67:42:03:11:08
- ☐ ☐ 59. Is the refrigeration temperature maintained at 41 degrees or below?
67:42:03:11:08
- ☐ ☐ 60. Are frozen foods kept at a temperature of 0 degrees F or below? 67:42:03:11:08
- ☐ ☐ 61. Is there a fully charged, portable fire extinguisher, with minimum 2A rating, kept near the food prep area? 67:42:03:11:02
- ☐ ☐ ☐ 62. Are guards used to protect children from & restrict their access to hot surfaces & open flames? 67:42:03:11:06
- ☐ ☐ ☐ 63. If fuel fired room heaters are used, are they vented to outside? 67:42:03:11:06
- ☐ ☐ 64. When children are in care, is the home's temperature appropriate to meet the needs of the children? 67:42:03:11:06
- ☐ ☐ 65. Are fire arms, ammunition, matches, lighters, archery equipment, and cords on window blinds stored in an area or manner inaccessible to children? 67:42:03:21
- ☐ ☐ 66. Are sharp and small objects that could present a choke hazard inaccessible to children (knives, scissors, tools, items the size of a half-dollar or smaller)?
67:42:03:21
- ☐ ☐ ☐ 67. Are doors and windows being used for ventilation screened and in good repair?
67:42:03:11:09
- ☐ ☐ 68. Does it appear that insects and rodents are under control? 67:42:03:11:09
- ☐ ☐ 69. Is the hot water temperature at hand washing sinks maintained at 120 degrees or lower? 67:42:03:11:05
- ☐ ☐ 70. Is water obtained from a community public water system or from a private system tested for nitrates and bacteria annually by the SD Department of Environment and Natural Resources? 67:42:03:11:05
- ☐ ☐ ☐ 71. If the provider has pets, do they appear to be in good health and a friendly companion to children, inspector, etc.? 67:42:03:22
- ☐ ☐ ☐ 72. Is there documentation showing pets have current vaccination records?
67:42:03:22
- ☐ ☐ ☐ 73. Are pet's living quarters clean and pet food inaccessible to children? 67:42:03:22
- ☐ ☐ ☐ 74. If caring for children under 4 yrs. of age, are all unused electrical wall sockets covered? 67:42:03:11:07
- ☐ ☐ 75. Is there an operating smoke detector with audible alarm located on each level of the home (regardless if level is used for care of children or not)? 67:42:03:11:02

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|--------------------------|--------------------------|--------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | | 76. For each level of the home used for the care of children, are there 2 unblocked exits, separate and remote from each other? 67:42:03:11.03
Note: Window wells or outside structures of building etc. cannot inhibit or prevent safe exiting. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 77. Are storm windows and screens easily opened from the inside to allow evacuation in case of a fire? 67:42:03:11.03 |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 78. If windows are used as a second exit, does the window provide a clear opening that is at least 20 inches wide and 24 inches high and 5.0 square feet in area to ensure a person can exit from the window? 67:42:03:11.03 |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 79. If there is more than 44 inches between the floor and the bottom of the window, is there a stable and permanent platform underneath the window to bring the distance to 44 inches or less? 67:42:03:11.03 |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 80. Are all open-sided floor and wall openings, and platforms <u>inside & outside</u> the home which are more than 30 inches above floor level, guarded by a barrier that prevents falling or becoming entrapped? 67:42:03:11.10 |

Yes	No	NA	D. Health & Safety Features of the Home - Outdoor Environmental Observations
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| <input type="checkbox"/> | <input type="checkbox"/> | | 81. Is the outside play area free of litter, trash, weeds and other hazardous materials? 67:42:03:17 |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 82. Is playground equipment properly installed, in good repair, without sharp or protruding edges? 67:42:03:17 |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 83. Are all play areas fenced which are near an area that is dangerous or life-threatening & that could allow or cause serious injury to children? 67:42:03:17
Note: This includes, but is not limited to, pools, water filled ditches, etc. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 84. Is the provider outside giving constant and direct supervision to children in areas where any bodies of water are present? 67:42:03:20
NOTE: This includes, but is not limited to, pools, wading pools, water filled ditches, etc. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 85. If there is a trampoline, is it inaccessible to the children? 67:42:03:21 |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 86. If a wading pool is used, is it drained after each use? 67:42:03:20 |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 87. If a pool is used, but not drained after each use, is there a five foot fence surrounding all four sides of the pool and a locked gate restricting access into the pool area? 67:42:03:20 |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 88. If the house has a hot tub, does it have a secure cover that cannot be moved or fallen through by children? 67:42:03:20 |



89. Is the provider present outside while providing supervision to all children under the age of three during outdoor play time? 67:42:03:15

Comments:

Provider found to be in full compliance:

For provider use only, do not post report

Provider's Name:
Inspector:

City:
Date of Inspection:

Provider Number:
Time of Inspection:

Name	Age	Enrollment Date	Information Sheet	Emergency Contact	Physician Contact	Emergency Permission	Immunization Records	Immunization Notes
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